# United States District Court

for the

Eastern District of New York

YANA DELKHAH	)
	)
Plaintiff(s)	)
v.	Civil Action No. 22cv3929
NEW YORK PRESBYTERIAN BROOKLYN METHODIST HOSPITAL and KINGS PHYSICIAN SERVICES P.C.	) ) )
Defendant(s)	)

### SUMMONS IN A CIVIL ACTION

To: (Defendant's name and address) See attached rider.

A lawsuit has been filed against you.

Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are:

Kevin Mintzer Law Office of Kevin Mintzer, P.C. 1350 Broadway Ste. 2220 New York, NY 10018

If you fail to respond, judgment by default will be entered against you for the relief demanded in the complaint. You also must file your answer or motion with the court.

Date: 7/6/2022



BRENNA B. MAHONEY CLERK OF COURT

|s|Priscilla Bowens

Signature of Clerk or Deputy Clerk

Civil Action No. 22cv3929

### PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (name of individual and title, if any)							
was received by me on (date)								
	☐ I personally served the summons on the individual at (place)							
			on (date)			; or		
	☐ I left the summons at the individual's residence or usual place of abode with (name)							
	on (date), a person of suitable age and discretion who resides there,  on (date), and mailed a copy to the individual's last known address; or							
	☐ I served the summons on (name of individual)					, who is		
	designated by law to accept service of process on behalf of (name of organization)  on (date)			e of organization)(date)	; or			
	☐ I returned the summons unexecuted because					; or		
	☐ Other (specify):							
	My fees are \$	for travel and	\$	for services, for a total of \$	0.0	)O .		
	I declare under penalty of perjury that this information is true.							
Date:								
	Server's signature							
		-	Printed name and title					
		-		Server's address				
		server's address						

Additional information regarding attempted service, etc:

Print Save As... Reset

# Rider

## List of Defendants

- New York Presbyterian Brooklyn Methodist Hospital 506 6<sup>th</sup> Street Brooklyn, NY 11215
- Kings Physician Services PC 506 6th Street Brooklyn, NY 11215